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CONFIRMATION NO. 3190

<b>SERIAL NUMBER</b> 10/518,732	<b>FILING OR 371(c) DATE</b> 12/20/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 18025-PCTUS
<b>APPLICANTS</b> Robert M Lorence, Bethesda, MD; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/16474 05/22/2003 which claims benefit of 60/390,632 06/21/2002 <b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 23 <b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Robert M Lawrence 6308 Maiden Lane Bethesda ,MD 20817				
<b>TITLE</b> Administration of therapeutic viruses				
<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	